

Module 5: Underwriting CHCs Case Study #1 – CHC Requesting Working Capital Loan

Purpose of Case Study

Community health centers (CHCs) generally operate with slim operating margins and have to constantly control their costs. In order to pay for personnel and operating expenses, many CHCs rely on short-term working capital loans to satisfy their cash needs. The purpose of this case study is to assist CDFIs in learning to evaluate the risks associated with a health center's need for a working capital line of credit, relative to the health center's prior scale and performance.

Instructions

As part of your preparation for the *Financing Community Health Centers* Workshop, please read the narrative and financial projections of the proceeding case study. As you are reviewing the case study, evaluate the strengths, risks, and mitigants for a CDFI considering the financing request. Be prepared to respond to the following questions:

Please answer the following questions during the **small group discussion.** (25 minutes)

- 1. What are the main strengths of the project and borrower?
- 2. What are the main weaknesses or areas of risk?
- 3. What additional information should the CDFI request for its underwriting/due diligence review?

Please answer the following questions during the **large group discussion**. (25 minutes)

- 4. What are the major business assumptions that are driving the projections and the factors critical to the success of the project?
- 5. What major concerns do you have as a potential lender to this project?



COMMUNITY CLINIC A's Working Capital Loan Request

Summary of Financing Request

COMMUNITY CLINIC A is experiencing a cash flow shortage due to the recent implementation of a new practice management system that resulted in an increase in accounts receivable. It is requesting a \$400,000 working capital loan with terms the following terms - 5 years fully amortizing after a 6-month IO period and 3.175% interest rate.

Part I: Overview of Health Center

Business Profile

COMMUNITY CLINIC A was formerly owned and operated by the Local Health Care District. It was purchased from the Local District Hospital in July 1998. COMMUNITY CLINIC A first became a Federal Qualified Look A-Like in 1997 and became a full FQHC in 2000. COMMUNITY CLINIC A operates a total of 3 primary care sites and employed 128 FTEs in 2010.

COMMUNITY CLINIC A's mission is to provide quality healthcare and other related charitable and educational opportunities to people of all ages and incomes living in and around the rural area of Town A. COMMUNITY CLINIC A provides a continuum of care throughout the lifecycle for children and adults. Health center services are available to low income, uninsured and under insured individuals and families based on a sliding-fee-scale. COMMUNITY CLINIC A serves a rural and primarily Hispanic population. According to its 2010 UDS report, 78% of patients are at or below 100% of the federal poverty line. The following table provides a break-down of encounters by encounter type from FY08 to FY10.

Table 1. Commence	of Doblowko and	T a.s. of F
Table 1: Summary	or Patients and	Types of Encounters

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	FY 20	08	FY 2009		FY 20	10	
Patients		21,941		24,050		19,648	
Growth			10%		-18%		
Encounter Type							
Medicaid	51,462	59%	54,131	57%	55,765	56%	
Sliding Fee	11,202	13%	16,408	17%	25,619	26%	
Medicare	7,736	9%	7,712	8%	7,581	8%	
Other	16,739	19%	16,861	18%	9,874	10%	
Total Encounters	87,139	100%	95,112	100%	98,839	100%	
Growth			1%		4%		

Please note that even though patient encounters increased by 4% in FY10, total patients appear to have decreased by 18%. However, the patient count provided for 2010, is likely understated. In 2010, COMMUNITY CLINIC A operated two practice management systems -- MegaWest and NextGen. In making the transition to Electronic Health Records, half of the data was housed on one system while half was housed in the other system. While the health center attempted to get the numbers as accurate as possible, management believes that the number of patients actually stayed the same or increased slightly, as evidenced by encounter growth and patient service revenue. COMMUNITY CLINIC A also added a small





number of providers in 2010, furthering the likelihood that patients actually increased in 2010. In addition, sliding fee encounters are likely overstated in 2010 due to the data transition. While sliding fee encounters have increased as a portion of total encounters, it is likely that some patient categories considered to be "sliding fee" were formerly categorized as "other."

Management

COMMUNITY CLINIC A's management team consists of the following persons:

- **Graciela Soto Perez**, has served as **Chief Executive Officer (CEO)** of COMMUNITY CLINIC A since August 2003. Prior to this position, Ms. Perez served as a Graduate Administrative Resident at the Local HealthCare District. She also has 20 years of experience in farm and migrant labor. Ms. Perez has a Masters in Health Administration and a Bachelor of Science in Public Policy and Management both from the University of Southern California.
- **Victor Sunga, M.D.** has served as the **Chief Medical Officer (CMO)** of COMMUNITY CLINIC A since February 2008. Mr. Sunga has practiced medicine for over 25 years. His management experience ranges from private practices, medical centers, to public health departments. Mr. Sunga has a Doctor of Medicine from Manila Central University in the Philippines.
- Judith Price Waterman, has served as the Chief Financial Officer (CFO) of COMMUNITY
 CLINIC A (on contract with her accounting firm "Price Waterman Accounting Services") since 2005.
 Ms. Waterman has provided financial management support to community health clinics since 1988.
 She has 40 years of experience in accounting and financial management. Ms. Waterman has a
 degree in fine arts and political science from Washington University in St. Louis, Missouri; a degree
 in political science from Lake Forest College in Lake Forest, Missouri; and a degree in accounting
 from Roosevelt University in Chicago, Illinois.
- **Kenneth Allen** was recently hired as an **IT Specialist** in August 15, 2011¹. He has five years of experience working in the health IT industry (at the Regional Medical Center) and nearly 10 years experience in the IT industry overall. Mr. Allen is currently seeking a Bachelor of Science in Health Administration with a concentration in Health IT Systems from the University of Phoenix On-line. He has earned 3 associates degrees in Information Technology, Computer Technology, and Network Technology -- 2 from Heald College in Fresno, CA and 1 from Phillips Junior College in Fresno, CA.

COMMUNITY CLINIC A is governed by a volunteer community board of directors, consisting of ten members, the majority of which are patients of COMMUNITY CLINIC A. The board experience covers a variety of professions including accounting, development, education, and health care professionals.

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¹ IT has been a contracted service since 2005. However, Mr. Allen was hired on as a full time IT on staff due to the implementation of Electronic Health Records. The former IT consultant returned to school full time.



Market Description

COMMUNITY CLINIC A is the only FQHC in its service area, though, there is one FQHC look-alike located in the County. There is also several rural health clinics located in the COMMUNITY CLINIC A service area, which tend to be smaller clinics run by physician's assistant's. These entities refer specialty visits to COMMUNITY CLINIC A. The nearest FQHC is located in Town B, which is about 15 to 20 minutes away. In terms of both primary care and specialty services, these healthcare alternatives have not affected COMMUNITY CLINIC A demand.

COMMUNITY CLINIC A distinguishes itself among other healthcare alternatives in its service area in the following ways:

- Offers specialists on site.
- The only provider in the valley that operates high school clinics.
- Certified as a Sweet Success Program provider for pregnant women.
- One of the few clinics with the amount of medical doctors versus physician extenders working in the clinic.

Part II: Collateral and Financial Analysis

The following financial overview documents COMMUNITY CLINIC A's historical financial performance based on the last four years of audited financial statements (Exhibits 1-3) and key financial ratios (Exhibit 4).

Collateral

Prominent among COMMUNITY CLINIC A's assets are cash, accounts receivable (excluding grants receivable), and equipment. The proposed loan will be secured by an overall fourth position UCC-1 lien on all non-real estate assets. Lender will be subordinate to the following entities for the assets and values specified below:

- 1) "Bank A" maintains a lien on all assets. At 06/30/2011, the Citizen's Bank line of credit balance was \$500M.
- 2) "Vendor A" maintains a lien on medical software and services (purchased in late 2010) valued at \$88M.
- 3) "Vendor B" maintains a lien on sales order #30559513 valued at \$0, as COMMUNITY CLINIC A is current with PSS.

Because liens 2 and 3 are secured by specific equipment, Lender will have a second position lien on cash and accounts receivable and a fourth position lien on equipment. A lien search was conducted on 9/23/11 to confirm Lender's lien position.

The collateral coverage ratio, as determined by collateral value/loan amount is 6.88x (not using the discounted value) or 4.25x (using the discounted value). Accounting for the value of prior liens, the collateral coverage ratio decreases to 5.41x (not using the discounted value) or 2.78x (using the discounted value).

COMMUNITY CLINIC A's percentage of A/R aged 30-90 days, as shown in Table 2, can primarily be attributed to the implementation of a new practice management system that has caused delays in receipts. The new practice management system was implemented July 1, 2010. As of underwriting, most of the





issues have been addressed, and the A/R aging report has improved substantially since initial implementation. Many of the receivables aged more than 90 days are not the result of delays in receipts, but rather variances in the cost of service and the level of third party reimbursements. These receivables will eventually be written off, and COMMUNITY CLINIC A maintains an allowance to cover these write-offs. Please note that the collateral coverage ratio only takes into account receivables aged 30 days or less.

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То	tal A/R as of Most	Recent Report	\$	2,000,756								
Da	Date: 9/20/2011											
	Aged < 30 Days	Aged 31-60 Days		Aged 61-90 Days	Aged > 90 Days							
\$	856,793	\$ 483,403	\$	151,748	\$	508,812						
	42.8%	24.2%		7.6%		25.4%						

Summary Financial Analysis

COMMUNITY CLINIC A has experienced uneven performance over the last three fiscal years. While revenue growth has been consistent, increases in operating expenses outpaced revenues in FY08, resulting in a net loss. However, revenues and operating expenses have increased in line with one another in FY09 and FY10, resulting in net surpluses.

COMMUNITY CLINIC A has exhibited declining stability in its balance sheet over the past three fiscal years, characterized by declining liquidity and acceptable, but increasing leverage.

Table 3 below illustrates the historical debt service coverage ratio (DSCR) for all sources of debt for FY08 to FY11, including P&I on the proposed CPCA loan. COMMUNITY CLINIC A is able to service all existing and proposed debt in FY09 and FY10 with DSCRs of 5.70x and 3.32x, respectively. However, COMMUNITY CLINIC A is not able to service all existing and proposed debt in FY08 and FY11 with DSCRs of (0.64x) and (1.86x), respectively. These insufficient DSCRs are the result of organizational operating losses. At 7/31/2011, COMMUNITY CLINIC A is able to service all existing and proposed debt with a DSCR of 2.72x.

Fable 3: DSCR Analys	sis
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(in thousands)	FY	E 2008	F	YE 2009	F	YE 2010	Jun-11	Jul-11
Operating Cash Flow								
Net Income	\$	(627)	\$	241	\$	735	\$ (898)	\$ 21
Plus: Depreciation		137		182		204	168	14
Plus: Amortization		-		-		-	151	8
Plus: Interest		3		3		35	12	4
Plus: Bad Debt Expense		380		475		215	428	-
Less: Capital Grants		-				558	172	1
Operating Cash Flow		(107)		901		631	(311)	46
Current/Proposed Debt Service								
Interest Expense	\$	3	\$	3	\$	35	\$ 12	\$ 4
CPLTD	\$	10	\$	=	\$	-	\$ -	\$ -
Existing Citizen's Bank LOC (\$500M, IO 5%)	\$	25	\$	25	\$	25	\$ 25	\$ 2
Proposed CPCA Loan (\$600M, 5 yrs, 3.175%)	\$	130	\$	130	\$	130	\$ 130	\$ 11
Total Debt Service	\$	168	\$	158	\$	190	\$ 167	\$ 17
Debt Service Coverage Ratio		(0.64)		5.70		3.32	(1.86)	2.72





Exhibit 1 COMMUNITY CLINIC A's Detailed Balance Sheet

Statement Date	FYE 2008		FYE 200	9	FYE 2010	0	6/1/2011		7/1/20:	11
Months Covered		. 12	12	.	12	.	12		12	
Audit Mthd	Unqualif	d	Unqualif	d	Unqualif	d	Co.Prep	o'd	Co.Prep	o'd
Accountant	C&L		C&L		C&L					
Analyst	FGuye		FGuye		KSamuels	s	KSamue		KSamue	
Stmt Type	Annual		Annual		Annual		Annua	ı	FY-To-D	ate
Accounting Standard										
CURRENT ASSETS										
Cash	1,120	30.2	967	28.7	303	5.3	138	2.6	45	0.8
A/R - patients	2,204	59.4	2,011	59.6	1,965	34.2	1,558	29.4	1,884	34
A/R - grants and other	36	1	42	1.2	213	3.7	305	5.8	302	5.4
Est. third party payors settlements	4	0.1	131	3.9	341	5.9	461	8.7	412	7.4
Bad Debt Reserve	475	12.8	648	19.2	194	3.4	348	6.6	354	6.4
Total Accts/Rec-Net	1,769	47.7	1,536	45.5	2,325	40.4	1,976	37.3	2,244	40.5
Prepaids/Deferreds - CP	202	5.4	228	6.8	671	11.7	176	3.3	268	4.8
•										
TOTAL CURRENT ASSETS	3,091	83.3	2,731	80.9	3,299	57.4	2,290	43.2	2,557	46.1
NON-CURRENT ASSETS										
Land	-	-	-	-	1,896	33	1,896	35.8	1,896	34.2
Construction in Progress	-	-	33	1	78	1.4	33	0.6	33	0.6
Machinery & Equipment	991	26.7	1,022	30.3	1,069	18.6	1,756	33.1	1,756	31.7
Leasehold Improvements	913	24.6	1,054	31.2	1,076	18.7	1,313	24.8	1,313	23.7
Gross Fixed Assets	1,904	51.3	2,109	62.5	4,119	71.7	4,998	94.3	4,998	90.2
Accum Deprec & Impairment(-)	1,283	34.6	1,466	43.4	1,670	29.1	1,990	37.6	2,012	36.3
			·		·				·	
Total Fixed Assets - Net	621	16.7	643	19.1	2,449	42.6	3,008	56.8	2,986	53.9
TOTAL NON-CURRENT ASSETS	621	16.7	643	19.1	2,449	42.6	3,008	56.8	2,986	53.9
TOTAL ASSETS	3,712	100	3,374	100	5,748	100	5,298	100	5,543	100
CURRENT LIABILITIES										
ST Loans Payable-Bank	_	_	_	_	1,371	23.8	1.870	35.3	1,870	33.7
CP-Capital Lease Obligatns	10	0.3	_	_	-	25.0	-	55.5		-
Accounts Payable-Trade	335	9	304	9	348	6.1	476	9	772	13.9
Wages/Salaries Payable	372	10	426	12.6	697	12.1	440	8.3	454	8.2
Deferred Revenue	159	4.3	9	0.3	2	-	180	3.4	175	3.2
Cost report settlement due	562	15.1	133	3.9	95	1.7	-	-	-	-
TOTAL CURRENT LIABILITIES	1 420	20.7	072	25.0	2.512	42.7	2.066	F.C.	2 271	
TOTAL CURRENT LIABILITIES	1,438	38.7	872	25.8	2,512	43.7	2,966	56	3,271	59
NON-CURRENT LIABILITIES										
Capital Lease Obligations	12	0.3	-	-		-	-	-	-	
TOTAL NON-CURRENT LIABILITIES	12	0.3	-	_		-	-	-	-	-
TOTAL LIABILITIES	1,450	39.1	872	25.8	2,512	43.7	2,966	56	3,271	59
NET WORTH										
Retained Earnings	2,257	60.8	2,498	74	3,230	56.2	2,332	44	2,272	41
Temporarily restricted net assets	5	0.1	2,496 4	0.1	5,230	0.1	ےریے -	-		-
TOTAL NA BY THE CAN SET WORTH	2,262	60.9	2,502	74.2	3,236	56.3	2,332	44	2,272	41
TOTAL LIABILITIES & NET WORTH	3,712	100	3,374	100	5,748	100	5,298	100	5,543	100
Working Capital	1,653	44.5	1,859	55.1	787	13.7	-676	-12.8	-714	-12.9
Tang Net Worth-Actual	2,262	60.9	2,502	74.2	3,236	56.3	2,332	44	2,272	41

Notes:





1. Account Balance: ST Loans Payable-Bank - 6/30/2010 (12) Note matures January 2011.

Exhibit 2 COMMUNITY CLINIC A's Detailed Income Statement

Statement Date	FYE	2008	FYE :	2009	FYE 2	2010		June	e-11	July	-11
Months Covered Audit Mthd Accountant Analyst Stmt Type Accounting Standard	FC	12 ualif'd &L Guye nual	Unqu C8 FGu Ann	kL ıye	Unqua C& KSam Ann	ıL uels	2	Co.Pr KSan Anr	nuels	Co.Pr KSam FY-To	nuels
Patient Service revenue- net Grant revenue Contributions and other Net assets released from restriction	\$ 7,757 1,740 77	18	\$ 9,094 2,096 20 21	\$ 81 19 0	9,936 2,537 16 38	. 2		9,541 2,484 - -	\$ 79 21 -	\$ 783 220 - -	\$ 78 22 - -
NET SALES/REVENUE	9,578	3 100	11,231	100	12,527	10	0	12,025	100	1,003	100
GROSS PROFIT	9,578	3 100	11,231	100	12,527	10	0	12,025	100	1,003	100
General & Admin Expense Facility expense Depreciation Amortization Personnel Expense Contracted medical services Supplies Professional services Bad Debt Expense	774 72: 137 4,49: 2,52: 56: 61: 380	8 1 47 3 26 5 6	764 732 182 - 5,214 2,387 532 701 475	7 7 2 - 46 21 5 6 4	1,026 807 204 - 6,696 2,153 648 569 215	5 1		1,584 906 168 151 7,458 1,866 522 - 428	1 62 16	118 71 14 8 576 141 51	12 7 1 1 57 14 5 -
TOTAL OPERATING EXPENSE	10,202	2 107	10,987	98	12,318	9	8	13,083	109	979	98
NET OPERATING PROFIT	(624)	(7)	244	2	209		2	(1,058)	(9)	24	2
Interest Expense (-) Other Income Capital Grants - CIP Net assets released from restriction		5 0	3 21 - 21	- 0 - 0	35 40 558 37		0 0 5 0	12 - 172 -	-	4 - 1 -	0 - 0 -
TOTAL OTHER INCOME(EXP)	(3	<u> </u>	(3)	-	526		4	160	1	(3)	(0)
NET PROFIT	(627)	(7)	241	2	735		6	(898)	(8)	21	2
EBIT EBITDA EBIDA	(624 (487 (487	(5)	244 426 426	2 4 4	770 974 974		6 8 8	(886) (567) (567)	(7) (5) (5)	25 47 47	3 5 5
Adj to Retained Earnings		-	(1)		(1)			(6)		(81)	





Exhibit 3 COMMUNITY CLINIC A's Cash Flow Statement

Statement Date	FYE 2009	FYE 2010	6/1/2011	7/1/2011
Months Covered	12	12	12	12
Analyst	FGuye	KSamuels	KSamuels	KSamuels
Stmt Type	Annual	Annual	Annual	FY-To-Date
Accounting Standard				
Net Sales	\$ 11,231	\$ 12,527	\$ 12,025	\$ 1,003
Chg in Accts/Notes Rec-Trade(Net)	(242)	(1,004)	(79)	(268)
Cash Collected From Sales	10,989	11,523	11,946	735
Chg in Accts Payable-Trade	(31)	44	128	296
and minimum rayable made	(31)		120	250
Cash Paid To Suppliers	(31)	44	128	296
CASH FROM TRADING ACTIVITIES	10,958	11,567	12,074	1,031
S,G&A Expense(Less Non-Cash Exp)	(10,330)	(11,899)	(12,336)	(957)
Chg in Prepaids/Deferreds	(26)	(443)	495	(92)
Chg in Accruals & Other Pay	54	271	(257)	14
and my test date at outlet 1 ay	3.		(237)	
Cash Paid for Operating Costs	(10,302)	(12,071)	(12,098)	(1,035)
CASH AFTER OPERATIONS	656	(504)	(24)	(4)
Other Income (Expense)		561	172	1
Chg in Other Assets/Liabilities	(579)	(45)	83	(5)
Cig iii Other Assets/Elabilities	(3/3)	(15)	- 05	(3)
Other Income (Expense) & Taxes Paid	(579)	516	255	(4)
NET CASH AFTER OPERATIONS	77	12	231	(8)
Interest Expense	(3)	(35)	(12)	(4)
Cash Paid for Dividends & Interest	(3)	(35)	(12)	(4)
NET CASH INCOME	74	(23)	219	(12)
Current Portion Long Term Debt	(10)	(23)		- (12)
Carrent Fortion Long Term Debt	(10)			
CASH AFTER DEBT AMORTIZATION	64	(23)	219	(12)
Chg in Net Fixed Assets	(204)	(2,010)	(727)	8
Chg in Net Intangibles	-	-	(151)	(8)
Cash Paid for Plant and Investments	(204)	(2,010)	(878)	-
Cash Full for Flank and Investments	(201)	(2,010)	(6,6)	
FINANCING SURPLUS (REQMNTS)	(140)	(2,033)	(659)	(12)
Chg in ST Loans/Other Payables	-	1,370	500	· · ·
Chg in LT & Sub Debt	(12)	-	_	-
Chg in Capital	(1)	(1)	(6)	(81)
Total External Financing	(13)	1,369	494	(81)
Total External Financing	(13)	1,309	794	(61)
CASH AFTER FINANCING	(153)	(664)	(165)	(93)
Add:Beginning Cash & Equivalents	1,120	967	303	138
ENDING CASH & EQUIVALENTS	967	303	138	45
×				





Exhibit 4 COMMUNITY CLINIC A's Cash Flow Statement





Statement Date	FY 2008	FY 2009	FY 2010	6/1/2011	7/1/2011
Months Covered	12	12	12	12	12
Analyst	FGuye	FGuye	KSamuels	KSamuels	KSamuels
Stmt Type	Annual	Annual	Annual	Annual	FY-To-Date
Accounting Standard					
LIQUIDITY					
Working Capital	\$1,653	\$1,859	\$787	(\$676)	(\$714)
Quick Ratio	2.01	2.87	1.05	0.71	0.70
Current Ratio	2.15	3.13	1.31	0.77	0.78
Net Sales/Working Capital	5.79	6.04	15.92	(17.79)	(1.40)
				, ,	, ,
<u>LEVERAGE</u>					
Net Worth-Actual	2,262	2,502	3,236	2,332	2,272
Tang Net Worth-Actual	2,262	2,502	3,236	2,332	2,272
Eff Tang Net Worth-Actual	2,262	2,502	3,236	2,332	2,272
Debt/Worth	0.64	0.35	0.78	1.27	1.44
Debt/Tang Worth	0.64	0.35	0.78	1.27	1.44
Debt Less Sub Debt-Liability/Eff Tg Wth	0.64	0.35	0.78	1.27	1.44
Borrowed Funds/Eff Tg Worth	0.01	-	0.42	0.8	0.82
LT Debt/Net Fixed Assets	0.04	-	-	-	-
Total Liabilities/Total Assets	0.39	0.26	0.44	0.56	0.59
<u>COVERAGE</u>					
Interest Coverage	(208.00)	81.33	22.00	(73.83)	6.25
Net Income+Depr+Amort-Divs/CPLTD	(49.00)	N/A	N/A	N/A	N/A
UCA Cash Flow Coverage		25.67	0.34	19.25	(2.00)
UCA Cash Flow/CPLTD pp		5.92	0.34	19.25	(2.00)
EBITDA/Interest Exp+CPLTD	(37.46)	142.00	27.83	(47.25)	11.75
EBITDA/Interest Exp+CPLTD pp		32.77	27.83	(47.25)	11.75
EBITDA	(487.00)	426.00	974.00	(567.00)	47.00
EBIDA	(487.00)	426.00	974.00	(567.00)	47.00
PROFITABILITY (%)					
Return on Assets	(16.89)	7.14	12.79	(16.95)	0.38
Return on Equity	(27.72)	9.63	22.71	(38.51)	0.92
Gross Margin	100.00	100.00	100.00	100.00	100.00
Net Margin	(6.55)	2.15	5.87	(7.47)	2.09
<u>ACTIVITY</u>					
Net Accounts Receivable Days	67.41	49.92	67.74	59.98	816.61
Accounts Payable Days	12.77	9.88	10.14	14.45	280.94
Net Sales/Total Assets	2.58	3.33	2.18	2.27	0.18
Net Sales/Net Worth	4.23	4.49	3.87	5.16	0.44
Net Sales/Net Fixed Assets	15.42	17.47	5.12	4.00	0.34
Profit Before Taxes/Total Assets (%)	(16.89)	7.14	12.79	(16.95)	0.38
CDOWTH (04)					
GROWTH (%) Total Assets Growth		(9.11)	70.36	(7.83)	4.62
Total Liabilities Growth		(39.86)	188.07	18.07	10.28
Net Worth Growth					
Net Sales Growth		10.61 17.26	29.34 11.54	, ,	(2.57)
					(91.66)
Operating Profit Growth Net Profit Growth		N/A	(14.34)		N/A
INEL PIOIT GROWTH		N/A	204.98	IV/A	N/A

